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# **TELECOPIER COVER SHEET**

## November 21, 2005

To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818-493-2251			
Attention: TECHNOLOGY CENTER 3700 Examiner: Michael Kahelin Art Unit: 3762	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221			
Telecopier: 571-273-8300	Telecopier: 818/362-4795			
RE: Filing of Amendment After Final and First Supplemental Information Disclosure Statement	Number of pages being sent:  15 (including cover page)			
App. No.: 10/603,429 Filed: 06/24/2003 Docket No.: A03P1031				
Confirmation No.: 4308				

PLEASE DELIVER TO EXAMINER MICHAEL KAHELIN, Art Unit 3762. Thank you.

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### **PATENT**

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Zifei Wang et al.

Confirmation No.: 4308

Serial No.:

10/603,429

Examiner:

Michael Kahelin

Filed:

06/24/2003

**Art Unit:** 

3762

Docket No.: A03P1031

For:

SYSTEM AND METHOD FOR DETECTING CARDIAC ISCHEMIA

USING AN IMPLANTABLE MEDICAL DEVICE

### TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment (AF) Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

Amendment After Final

First Supplemental Information Disclosure Statement

PTO-1449 (copies of references not enclosed)

Transmittal Letter, Fee and Cert. of Mailing

 X	Charge Deposit Account No. 16-0068			80**	A copy of this letter is		
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)						
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.)  Specify: First Supplemental Information Disclosure Statement						
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160						
С	MULTIPLE- DEPENDENT					X \$ 360	0
В	INDEPENDENT CLAIMS FEE**	6	6		0	X \$200	0
A	TOTAL CLAIMS FEE	20	20 0		0_	X \$ 50	\$ 0
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIM	IS FILED	LARGE ENTITY FEE	\$ FEE

the amount of

enclosed.

#### **PATENT**

- The Commissioner is hereby authorized to charge payment of the following fees **X**\_ associated with this communication or credit any overpayment to Deposit Account No. 16-0068
  - Any additional filing fees required under 37 CFR 1.16.
  - Any patent application processing fees under 37 CFR 1.17.
- <u>X\_</u> The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
  - Any patent application processing fees under 37 CFR 1.17.
  - $\frac{X}{X}$ Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

David S. Sarisky, Reg. M.

Patent Attorney for Applicant 818-493-3369

**CUSTOMER NUMBER: 36802** 

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

November 21, 2005

Estella Pineiro